

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

SERIAL NO.  
10754368  
APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2	1					
3	1					
4	1					
5	1					
6	1					
7		1				
8	1					
9	1					
10		2				
11	1					
12		1				
13		1				
14	1					
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16	1					
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49						
50						
TOTAL IND.	12					
TOTAL DEP.	16					
TOTAL CLAIMS	28	12	12	12	12	12

CLAIMS	IND	DEP	IND	DEP	IND	DEP
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						